PATENT APPLICATION FEE DETERMINATION REC								Application or Docket Number					
	PATENT	ORC	10821588										
CLAIMS AS FILED - PART I										<u> </u>			
(Column 1) (Column 2)								SMALL Type		OR		R THAN . ENTITY	
TOTAL CLAIMS			. 18.					RATE	FEE	٦	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	Œ 385.00	ÓЯ	BASIC FE	770.00	
TOTAL CHARGEABLE CLAIMS			18 minus 20=		•			XS 9=		OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		• 1			X43=	-	OR	Yac	86	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	†	7		100	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	┼──	JOR		1000	
CLAIMS AS AMENDED - PART II								IOIAL		JOR		1927	
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	- 18	Minus	- 2		=		.X\$ 9=		OR	X\$18=	TEE_	
	Independent	• 4	Minus	4	4		İ	X43=		ОЯ	X86≃		
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+145=	·	1	+290=		
212216							Ŀ	TOTAL		OR OR	TOTAL		
(Column 1) (Column 2) (Column 3)							•	DDIT. FEE	L	JOH	ADDIT. FEE		
8		CLAIMS REMAINING		HIGHE	ST		ı		ADDI-	1		ADDI-	
AMENDMENT B		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	• 4	Minus	-	<u>(</u>	•		X\$ 9=		OR	X\$18=		
	Independent FIRST PRESE	NTATION OF MU	Minus	PENDENT	CLAIM			X43=		OR	X86=		
								+145=		OR	+290=		
	•									OR ,	TOTAL LOOIT, FEE		
_	·	(Column 1)		(Colum		(Column 3)	_ :		. •			•	
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ĖR. JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2	Total	•	Minus	•			F	X\$ 9=		OŘ	X\$18=		
3			Minus . •••			•	H	X43=		.	X86=		
	FIRŞT PRESE	NTATION OF MU	LTIPLE DEF	ENDENT (MIAL		F			OR			
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.													
-4	the Highest Nur the Highest Nur	nbar Proviously Pal mber Proviously Pal	d For IN THU IS For IN THE	S SPACE is ! S SPACE is !	ess than	20, enter "20."		TOTAL OIT. FEE			DOIT. FEE		
1	ne Tighest Num	ber Previously Paid	For (Total or	Independent	i) is the	Nghest number	found	I in the app	ropriste box	in cots	MA 1.	1	

FORM PTG-875 (Rex. 10/03)